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ABSTRACT

Until recently, most of the emphasis on the understanding of sex roles has focused on how sexist attitudes and sex role stereotypes affect women. Often times men are the objects of stereotypical thinking, which results in certain assumptions about masculinity that can prove to be self-defeating and destructive to relationships on all levels. Male sex role stereotypes affect therapeutic issues in numerous ways. Irrational beliefs may lead to sexual dysfunction. A combination of questioning and challenging of irrational beliefs, information giving, and consciousness raising will help male clients free themselves from performance anxiety and the resulting sexual dysfunctions. Irrational beliefs connected with relationship issues for males typically include feeling solely responsible for the financial support and happiness of the family; never feeling weak, vulnerable, or afraid; and worrying that showing affection toward another man is homosexual, or showing affection toward one's daughter is incestuous. Irrational beliefs men typically have about work situations revolve around need for achievement. Self-worth is often defined by work. Rather than talking about and owning up to difficult feelings, male clients often act them out. In order to help clients overcome male sex role stereotypes, consciousness raising and using different language can be effective. Therapists should also be aware of, and try to correct their own issues with sex role stereotypes. (LLL)

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by

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A major tenant of all the cognitive-behavioral therapies and most notably, Dr. Albert Ellis' Rational-Emotive Therapy (RET), is that our thoughts, cognitions, or beliefs, - both spoken and unspoken, as well as those which are conscious, pre-conscious, and unconscious - are primarily what create our emotions.

Another assumption is that it is the tendency toward absolutistic thinking which leads to some of our most destructive attitudes and dysfunctional behavior patterns.

Societal norms that have been so instrumental in dictating sex role stereotypes have been the subject of discussion for decades. However, until recently, most of the emphasis on the understanding of sex roles has focused on how sexist attitudes and sex role stereotypes affect women.

Most of us who do psychotherapy have observed that often times men are no less the objects of stereotypical thinking (their own and by that of others close to them) which results in certain assumptions about masculinity that can prove to be

self-defeating and destructive to relationships on all levels. The self-defeating aspect of these gender related "shoulds" (as we refer to them in RET), is often so instrumental in men developing their own definitions of masculinity, that they can result in self-doubt, the inability to form and maintain meaningful relationships, and a tendency to go through life trying to live up to impossible standards and values that just don't work.

Sexual Dysfunctions

Male sex role stereotypes affect therapeutic issues in numerous ways. For example, the common irrational beliefs we encounter when treating male sexual dysfunction include the following:

- o "If a woman comes on to me I must always be turned on and receptive or I am not sexually adequate."
- o "Sexual adequacy means always being ready, willing and able to get and maintain an erection."
- o "Men are not supposed to say no to sex; or a variation - it's not okay not to want sex; and if I am not turned on to a woman, it means I am either less of a man, gay, or somehow losing my masculinity, but in any case not as much of a man as I should be (or as I used to be)."

Obviously, at the root of these irrational beliefs is a great deal of conditioned naivete. A combination of disputing (which in RET means the questioning and challenging of irrational beliefs), information giving, and consciousness

raising, will go a long way toward helping male clients to free themselves from performance anxiety and the resulting sexual dysfunctions that are often the consequences of this kind of maladaptive thinking.

Relationships

- o Who initiates couples counseling? - When couples therapy is initiated by the male partner, it's more likely to be the result of a tangible crisis - such as an affair, a threatened or actual breakup, or a sexual dysfunction. When couples therapy is initiated by the woman, however, in my experience it's more likely to be an effort to address "poor communication", "lack of affection", and "lack of intimacy."

Irrational beliefs connected with relationship issues for males typically include:

- o "I am solely responsible for the support, well being and happiness of my family, and I believe I must insure that everyone's needs are met."
- o "I must never feel weak, vulnerable or afraid. If I have to feel anything at all, let it be the one 'acceptable' emotion - anger."
- o "I must be able to do all the things real men should be able to do such as, fix things around the house and solve everyone's problems."
- o "The only real affection I can show to a woman that counts is sexual."

- o "There is no such thing as a win/win situation - that's psycho-babble. Being a winner involves dominating the situation or the other person". I can win only if the other person loses."
- o "Showing affection toward another man - even one's own son - is homosexual."
- o "Showing affection toward one's daughter is incestuous."
- o Male clients can often use some coaching regarding their issues about fatherhood - especially single parenting issues such as how to become more comfortable with their children during visitation, and ways to spend visitation time. Other issues include coming to grips with the differences and conflicts men often have in relating to their sons, versus ways to relate to their daughters. Many men can use both support and information to help them to resist the temptation to avoid too much "one on one" with their children during single parenting situations. Often there is a tendency for non-custodial fathers to delegate much of the chores and responsibility of parenting to their female friends and other relatives who can at first (in the short run) make the visitation experience seem less awkward. In the long run, however, this can act toward diluting what could have been a more mutually rewarding relationship for both father and child if there was more one on one contact.

Work

Irrational beliefs men typically have about work situations include:

- o "I must achieve a level of success (often undefined) or I am a worthless failure."
- o "My self worth is defined by my work, the evaluations of others and its tangible rewards."

Acting Out Feelings

Rather than talking about and owning up to difficult feelings, our male clients often act them out. Thus:

- o Anxiety is often acted out through failure to perform sexually. Omnipotence is also a common attitude men use to mask anxiety resulting in perfectionism - which is really the fear of making a mistake.
- o Anger is also acted out, often through the failure to perform sexually, and through the type of passive aggressive avoidance behavior that can be rationalized as being normal. Also, acting out anger sometimes even results in verbal and physical abuse; through infidelity, and blatant neglect.
- o Depression is characteristically expressed through lack of motivation, withdrawal, through thrill seeking behaviors, by overwork, and by under achievement.

In addition, feelings of inadequacy and poor self evaluation are commonly acted out by striving to arouse envy in others. For example, how many of us have seen male clients who enter into a relationship with a woman solely on the basis of his perception of her as being seen as attractive by others, even though for all intents and purposes the relationship doesn't work on most of the important levels?

OVERCOMING MALE SEX ROLE STEREOTYPES:

In order to help clients to overcome male sex role stereotypes, the following can be considered:

- o Consciousness raising, which consists of pointing out the beliefs and resulting attitudes, behaviors, consequences and alternatives. When benefits of changing an irrational belief is stressed, consciousness raising is most effective. Never underestimate the value of this kind of information giving.
- o It's sometimes important to use different language when talking to men about emotions. Asking men "How or what do you feel regarding this?"will often draw a blank. Instead, ask questions like "What is it that you think about.....?"

Dilemmas of the Therapist

Be aware of the dilemmas of:

- o How to address the issue of sex role stereotypes without putting down white heterosexual males.
- o Do we as therapists have our own set of "shoulds" regarding what is proper male thinking and behaviors?

Such as:

- * "Men should be more in touch with their feelings."
- * "Men should be more androgenous."
- * "Men should be more attentive to their relationships with their partners, children and other non business and achievement oriented people."
- * "Men should not be so success oriented and take more time to smell the roses."
- * "Men can only be helped by male therapist (or can open up much better to a female therapist). Or more generically, no therapist can help someone with something they have not themselves experienced. I've seen variations of this strand of anti-empirical thinking applied to almost every conceivable therapeutic issue from cancer to divorce to sexual orientation to drug and alcohol recovery."
- * An even: "The male partner should be the one to be responsible for the bill for joint sessions."

These are some considerations that can be incorporated into your style of treatment regardless of your therapeutic orientation.